

IN THE MATTER OF THE STATEMENT OF CHARGES AGAINST MARK R. COLLISON, M.D., RESPONDENT

No. 02-97-272

TERMINATION ORDER AND

REFERRAL TO THE IOWA PHYSICIAN HEALTH PROGRAM

COMES NOW the Iowa Board of Medical Examiners (the Board), on May 4, 2004, and pursuant to Iowa Code 272C (2003) and 653 IAC section 14.7 files this Termination Order and Referral to the Iowa Physician Health Program (IPHP).

1. On June 1, 2000, the Iowa Board of Medical Examiners and Respondent entered into a combined Statement of Charges, Settlement Agreement and Final Order. The Board charged Respondent with the excessive use of alcohol and Respondent's Iowa medical license was placed on probation for five years, from June 1, 2000 through May 31, 2005, subject to certain terms and conditions.

2. On January 22, 2004, the Board voted to authorize the termination of the terms and conditions established in the June 1, 2000, combined Statement of Charges, Settlement

Agreement and Final Order and to refer Respondent to the IPHP for continued substance

abuse monitoring based on the following:

A. Respondent's compliance with the terms and conditions established in the

Board's Order for over three and one half years;

B. Respondent's successful substance abuse treatment progress; and

C. Respondent's cooperation with the Board.

3. Respondent has entered into a Monitoring Agreement with the IPHP and has

agreed to fully comply with all requirements established by the IPHP.

THEREFORE IT IS HEREBY ORDERED:

4. That the terms and conditions placed upon Respondent's Iowa medical license

under the June 1, 2000, combined Statement of Charges, Settlement Agreement and Final

Order are terminated and Respondent is referred to the IPHP for continued substance abuse

monitoring. Respondent's Iowa medical license is returned to its full privileges free and

clear of all restrictions.

Dated this 4 day of May, 2004.

Bruce L. Hughes, M.D., Chairperson

Iowa Board of Medical Examiners

400 SW 8th, Suite C

Des Moines, Iowa 50309-4686

BEFORE THE BOARD OF MEDICAL EXAMINERS OF THE STATE OF IOWA

IN THE MATTER OF THE STATEMENT OF CHARGES AGAINST MARK R. COLLISON, M.D., RESPONDENT

No. 02-97-272

SETTLEMENT AGREEMENT and FINAL ORDER (combined)

STATEMENT OF CHARGES

- 1. Respondent was issued license number 22966 to practice medicine and surgery in Iowa on July 1, 1982. Respondent's Iowa medical license is valid and will next expire on November 1, 2001.
- 2. The Board has jurisdiction in this matter pursuant to Iowa Code Chapters 147,148 and 272C.

COUNT I

3. Respondent is charged under Iowa Code section 148.6(2)(h) (1999) and 653 Iowa Administrative Code section 12.4(4) and 12.4(14) with the inability to practice medicine and surgery with reasonable skill and safety due to the excessive use of alcohol.

CIRCUMSTANCES

4. On January 21, 2000, the Board received information indicating Respondent suffers from alcohol dependence.

SETTLEMENT AGREEMENT

- 5. Respondent admits the allegations contained in the Statement of Charges.
- 6. Respondent successfully completed a comprehensive physical, neuropsychiatric and substance abuse evaluation at Professional Recovery Network (PRN) from January 9, 2000 through January 14, 2000.
- 7. Immediately upon the Board's approval of this combined Statement of Charges, Settlement Agreement and Final Order, Respondent's Iowa medical license shall be placed on probation for a period of five (5) years under the following terms and conditions:
 - Respondent shall comply with all aftercare recommendations made by the Professional Recovery Network (PRN).
 - b) Respondent shall within fourteen (14) days of the date of this order, contact Deb Anglin, Coordinator, Monitoring Programs, Iowa Board of Medical Examiners, 400 SW 8th Street, Suite C, Des Moines, IA 50309-4686, Ph. #515-281-6491, to establish a monitoring plan.

- c) Respondent shall not consume alcohol.
- d) Respondent shall not use any controlled or prescription drug in any form unless the controlled or prescription drug has been prescribed for Respondent's use by another duly licensed treating physician or other qualified treating health care provider. Respondent shall provide the Board written notice within fourteen (14) days of the use of any controlled or prescription drug. Respondent shall inform any treating physician or other treating health care provider of his history of substance abuse prior to receiving any prescription drug.
- e) Respondent shall submit to the Board's drug screening program.

 Respondent agrees to comply with all requirements of the drug screening program. Respondent shall also provide drug screen specimens on demand by an agent of the Board. The specimens shall be used for drug and alcohol screening, all costs of which shall be paid by Respondent.
- f) Respondent shall within thirty (30) days of the date of the Board's a approval of this Settlement Agreement, submit to the Board the name and curriculum vitae of a substance abuse treatment physician or counselor for Board approval to supervise Respondent's continued substance abuse treatment.
 - (1) As a condition of approval, the physician or counselor shall

- agree to submit written quarterly reports to the Board concerning Respondent's treatment progress. The reports shall be filed with the Board not later than January 20, April 20, July 20 and October 20 of each year of Respondent's probation.
- (2) Respondent shall continue with aftercare treatment until discharged from treatment by the Board approved physician or counselor and until Respondent's discharge from treatment is approved by the Board.
- (3) Respondent shall comply with all recommendations made by the Board approved physician or counselor.
- g) Respondent shall file sworn quarterly reports with the Board attesting to his compliance with all the terms and conditions of this Settlement Agreement, including attendance at meetings with his substance abuse counselor. The reports shall be filed not later than January 10, April 10, July 10 and October 10 of each year of Respondent's probation.
- h) Respondent shall attend at least eight (8) Board approved aftercare meetings (Alcoholics Anonymous or other similar organization) monthly. Respondent shall append to each quarterly report referred to in subparagraph 6-g above, statements signed or initiated by another person in attendance at the meetings attesting to the Respondent's attendance. The statement shall include the time, date and location of

- the meetings attended.
- i) Respondent shall make appearances before the Board or a Board committee annually or upon request. The Respondent shall be given reasonable notice of the date, time and location for the appearances.

 Any such appearance shall be subject to the waiver provisions of 653 IAC 12.6(6)(d).
- j) Respondent shall obey all federal, state and local laws, and all rules governing the practice of medicine in Iowa.
- 7. In the event Respondent leaves Iowa to reside or practice outside the state, Respondent shall notify the Board in writing of the dates of departure and return. Periods of residence or practice outside the state of Iowa will not apply to the duration of the Settlement Agreement and Final Order.
- 8. In the event Respondent violates or fails to comply with any of the terms or conditions of this combined Statement of Charges, Settlement Agreement and Final Order, the Board may initiate action to suspend or revoke Respondent's Iowa medical license or to impose other license discipline as authorized in Iowa Code Chapters 148 and 272 and 653 IAC 12.2.
- 9. Upon full compliance with the terms of this combined Statement of Charges, Settlement Agreement and Final Order, and upon expiration of the period of probation, Respondent's Iowa medical license shall be restored to its full privileges free and clear of the terms of probation.

10. This combined Statement of Charges, Settlement Agreement and Final Order constitutes the resolution of a contested case proceeding.

11. By entering into this combined Statement of Charges, Settlement Agreement and Final Order, Respondent voluntarily waives any rights to a contested case hearing on the allegations contained in the Statement of Charges, and waives any objections to the terms of this Settlement Agreement.

12. This combined Statement of Charges, Settlement Agreement and Final Order, is voluntarily submitted by Respondent to the Board for consideration.

13. This combined Statement of Charges, Settlement Agreement and Final Order is subject to approval of the Board. If the Board fails to approve this combined Statement of Charges, Settlement Agreement and Final Order, it shall be of no force or effect to either party.

14. The Board's approval of this Settlement Agreement and Final Order shall constitute a **Final Order** of the Board.

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Mark R. Collison, M.D., Respondent

Subscribed and sworn to before me on April 12, 2000.

Notary Public, State of Iowa

Detra L. Surry My comission expires 12-9-2002.

| This Settlement Agreement and Fina | Order is approved by | the Board on |
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June 1 ,2000.

Dale R. Holdiman, M.D., Chair Iowa Board of Medical Examiners 400 SW 8th Street, Suite C Des Moines, Iowa 50309-4686